****University of Louisiana at Lafayette

Administration and Finance

**CHECK REQUEST** (**FEES FOR PARTICIPANTS AND STIPENDS ) PUR 517**

Type of request: □ GSO □ SGA □ Participant Support *(Sponsored Programs)* □ Research Subject *(Sponsored Programs)* □ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Request Date Encumbrance #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Fund/Org/Program:** | **Total Amount Requested:** | **Commodity Code:** |
| **Department:** | **Contact:** | **Phone:** | **Email:** |
| **Study / Workshop / Grant Name:** |
| **Brief Description of Participant’s Function:** |

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| **Account Codes:**  | **760800 (PSC-Stipend)** | **760810 (PSC-Travel)** | **760820 (PSC-Subsistence)** | **760830 (PSC-Other)** | **760850 (Research Subject)** | **760520 (Grant Aid)** |
|  | **630102 (PSC-Stipend)** *UL Employee/UL Student Employee* **630103 (Research Sub)** *UL Employee/UL Student Employee* |
| **Account Code** | **Banner ID** | **Payee** | **Payee Mailing Address** | **Amount** | **US Citizen****Y/N** | **UL Employee****Y/N** | **UL Student Employee****Y/N** |
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| **TOTAL** |  |  |

This approval serves as a certification that the participants have successfully completed the requirements of their participation in the referenced grant/study/workshop and is evidenced by the attached documentation signed by the participant.

Authorizing Signature Printed Name Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Budget/Comptroller Approval Signature Date

 Encumbrance #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 Budget/Comptroller Approval Signature Date